Minutes of the meeting of the Human Resources Committee of the Board of Directors of the Cook County Health and Hospitals System (CCHHS) held Friday, May 20, 2016 at the hour of 9:00 A.M. at 1900 W. Polk Street, in the Second Floor Conference Room, Chicago, Illinois.

I. Attendance/Call to Order

Chairman Wiese called the meeting to order.

Present: Chairman Dorene P. Wiese and Mary B. Richardson-Lowry (2)

Board Chairman M. Hill Hammock (ex-officio) and Directors Hon. Jerry Butler, Ada Mary Gugenheim and Emilie N. Junge

Absent: None (0)

Additional attendees and/or presenters were:

Lilianna Kalin – Senior Labor and Employment Counsel
Jeff McCutchan – Interim General Counsel
Barbara Pryor – Deputy Chief of Human Resources
Deborah Santana – Secretary to the Board
Richard H. Sewell - Associate Dean, Community and Public Health Practice at UIC School of Public Health
John Jay Shannon, MD – Chief Executive Officer

II. Public Speakers

Chairman Wiese asked the Secretary to call upon the registered public speakers.

The Secretary called upon the following registered public speaker:

1. George Blakemore Concerned Citizen

III. Closed Meeting Items

A. Proposed Collective Bargaining Agreement-related matter (see Item IV(A))
B. Report from Chief of Human Resources
C. Discussion of personnel matters
D. Update on labor negotiations
E. Discussion of litigation matters

Chairman Wiese, seconded by Director Richardson-Lowry, moved to recess the open meeting and convene into a closed meeting, pursuant to the following exceptions to the Illinois Open Meetings Act: 5 ILCS 120/2(c)(**1**), regarding "the appointment, employment, compensation, discipline, performance, or dismissal of specific employees of the public body or legal counsel for the public body, including hearing testimony on a complaint lodged against an employee of the public body or against legal counsel for the public body to determine its validity," 5 ILCS 120/2(c)(**2**), regarding "collective negotiating matters between the public body and its employees or their representatives, or deliberations concerning salary schedules for one or more classes of employees," and 5 ILCS 120/2(c)(**11**), regarding "litigation, when an action against, affecting or on behalf of the particular body has been filed and is pending before a court or administrative tribunal, or when the public body finds that an action is probable or imminent, in which case the basis for the finding shall be recorded and entered into the minutes of the closed meeting."

III. Closed Meeting Items (continued)

On the motion to recess the open meeting and convene into a closed meeting, a roll call was taken, the votes of yeas and nays being as follows:

Yeas: Chairman Wiese and Director Richardson-Lowry (2)

Nays: None (0)

Absent: None (0)

THE MOTION CARRIED UNANIMOUSLY and the Committee recessed into a closed meeting.

Chairman Wiese declared that the closed meeting was adjourned. The Committee reconvened into the open meeting.

IV. Action Items

A. Proposed Collective Bargaining Agreement-related matter – approval of :

Negotiated wages and healthcare changes for (Attachment #1):

- Cook County Pharmacy Association, Chicago Joint Board, Retail, Wholesale & Department Store Union, AFL-CIO, CLC (RWDSU Local 200) representing Pharmacists and Pharmacy Technicians

Chairman Wiese, seconded by Director Richardson-Lowry, moved to approve the proposed negotiated wages and healthcare changes for the Cook County Pharmacy Association, Chicago Joint Board, Retail, Wholesale & Department Store Union, AFL-CIO, CLC (RWDSU Local 200) representing Pharmacists and Pharmacy Technicians. THE MOTION CARRIED UNANIMOUSLY.

B. Minutes of the Human Resources Committee Meeting of April 22, 2016

Director Richardson-Lowry, seconded by Chairman Wiese, moved to accept the minutes of the meeting of the Human Resources Committee of April 22, 2016. THE MOTION CARRIED UNANIMOUSLY.

C. Any items listed under Sections III and IV

V. Report from Chief of Human Resources (Attachment #2)

The Committee was provided the Report from the Chief of Human Resources for their information.

The Report included information on the following subjects:

- Internal and External Vacancies Filled;
- Hiring Waterfall and Snapshot through 4/30/16;
- FY16 Separations and Hires;
- Comparison of Separations; and
- FY2016 HR Goal: Improve/Reduce Average Time to Hire.

VI. Recommendations, Discussion / Information Item

A. Strategic planning discussion

Discussion continued through the Finance Committee Meeting scheduled for 10:00 A.M., following this meeting.

Topic: Health Information Systems, presented by Donna Hart, Chief Information Officer (Attachment #3)

Dr. John Jay Shannon, Chief Executive Officer, stated that Ms. Hart will be reviewing a strategic planning presentation on Health Information Systems (HIS). Additionally, he introduced Richard Sewell, Associate Dean of Community and Public Health Practice at UIC School of Public Health, who will be facilitating the strategic planning discussions in these meetings through to the adoption of a full strategic plan in the summer.

Ms. Hart provided an overview of the presentation, which included information on the following subjects:

- HIS Overview;
- Information Technology (IT) Steering Initiatives;
- Strategic Planning Framework Guidelines;
- Projects in Motion;
- IT Risks;
- Vision;
- Achieving the Vision; and
- Goal.

Following the presentation, Board Chairman Hammock stated that, in one sense, while billing systems continue to be needed, the financial challenge now is to get a robust cost system in place; this is critical to CCHHS' ultimate financial health. He requested that staff from the Finance and Health Information System Departments return with a plan to implement this; he would like to look at the issue, if not during, then after the strategic planning process. Chairman Wiese added that the cost system should include data on cost per unit for items.

Director Richardson-Lowry requested that a departmental organizational chart be provided to the Committee through the Chair that identifies the vacant positions in the department; she stated that having a sense of where those vacancies exist would be very helpful.

During the discussion of the information relating to the System's contract with Cerner, Director Richardson-Lowry inquired regarding the processes used to analyze the benefits, achievements and potential gaps in expectations or outcomes identified following the execution and implementation of a large-scale, multi-year contract like Cerner. Ms. Hart stated that this contract contains milestones and Service Level Agreements; the milestones are reviewed every quarter. Director Richardson-Lawry responded that the information was helpful; she requested that a benchmark analysis be provided to the Committee through the Chair.

VII. Adjourn

As the agenda was exhausted, Chairman Wiese declared the meeting ADJOURNED.

Respectfully submitted,
Human Resources Committee of the
Board of Directors of the
Cook County Health and Hospitals System

XXXXXXXXXXXXXXXXXXXX
Dorene P. Wiese, Chairman

Attest:

XXXXXXXXXXXXXXXXXXXX
Deborah Santana, Secretary

ATTACHMENT #1

COOK COUNTY HEALTH & HOSPITALS SYSTEM

Human Resource Committee

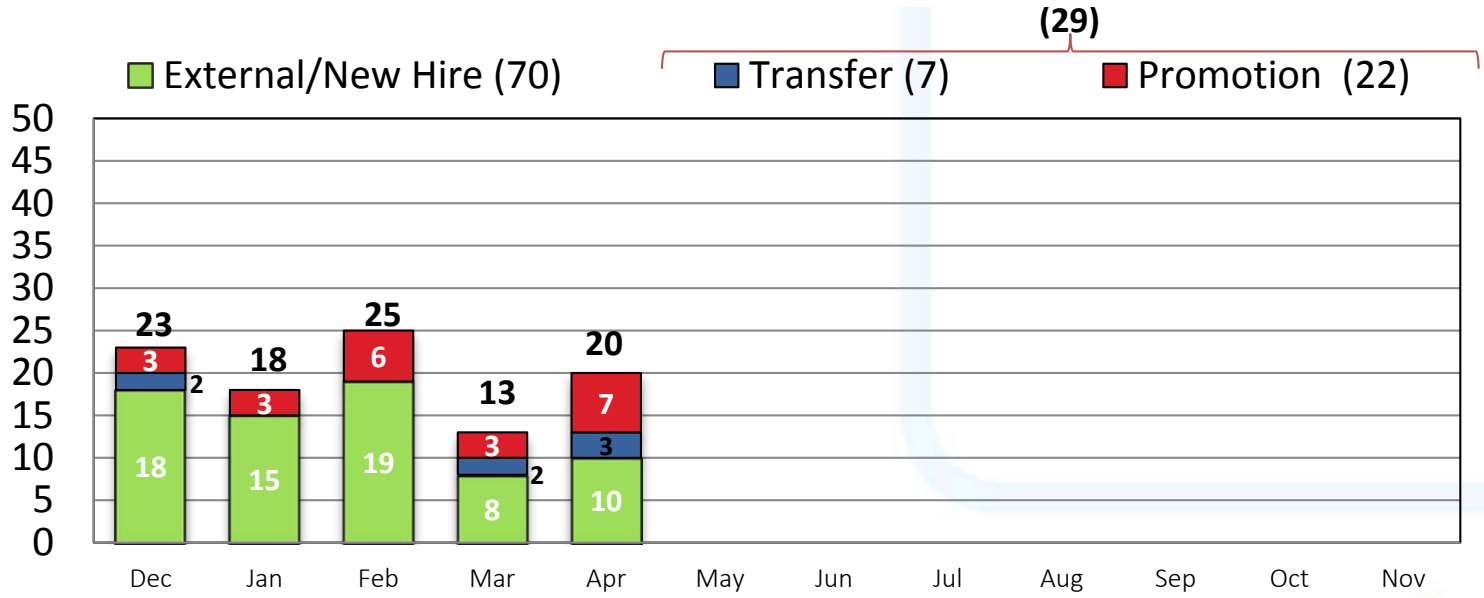
Gladys Lopez, Chief of Human Resources

May 20, 2016

Internal & External Vacancies Filled

FY16 VACANCIES - HR TRACKING OF CCHHS VACANCIES														
Description	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	TOTAL:	
Vacancy Number:	756	827	842	856	872									
Less Deleted Positions / PIDs:	0	0	0	0	0									
Add Separations:	89	30	33	24	46								222	
Less External Vacancies Filled:	18	15	19	8	10								70	
TOTAL:	**827**	**842**	**856**	**872**	**908**								**-152**	**(Net New)**

FY16 Vacancies Filled through 04/30/16 by Hiring Source (99)



Our goal is to maintain a vacancy rate equal to or below 750.

Labor Hold Update: Completed meetings with NNOC and Local 200; AFSCME Locals 1111, 1178 and 1276. Proceeding with extending offers to internal and candidates in these vacancies.

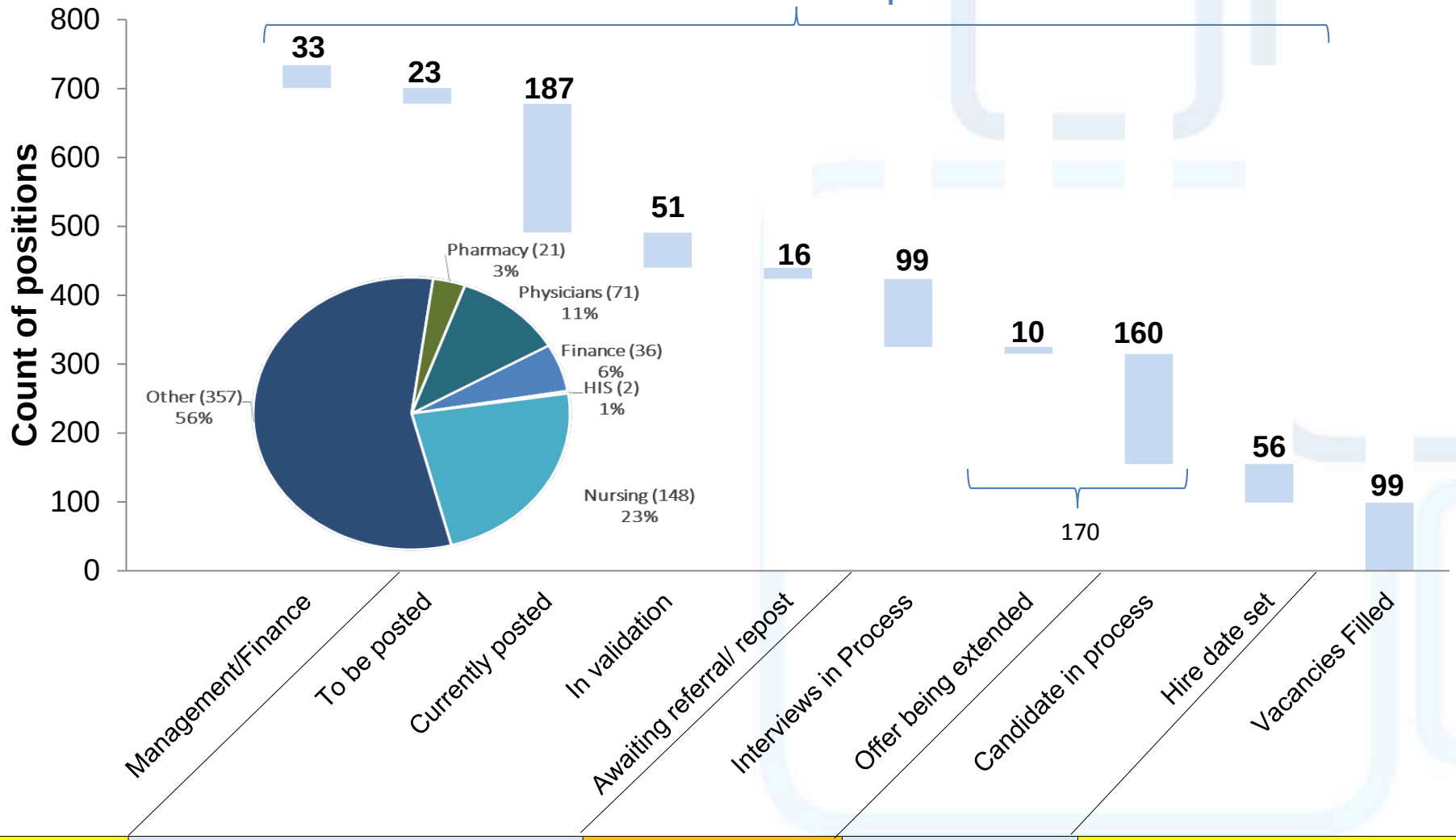
SEIU 73 - Displacement meetings are scheduled for early June.

[1] Fluctuation is based on new RTHs received and a Department decision to hold or re-class a PID.

[2] Positions to support strategic initiatives, such as re-organizations

CCHHS Hiring Waterfall & Snapshot (04/30/16)

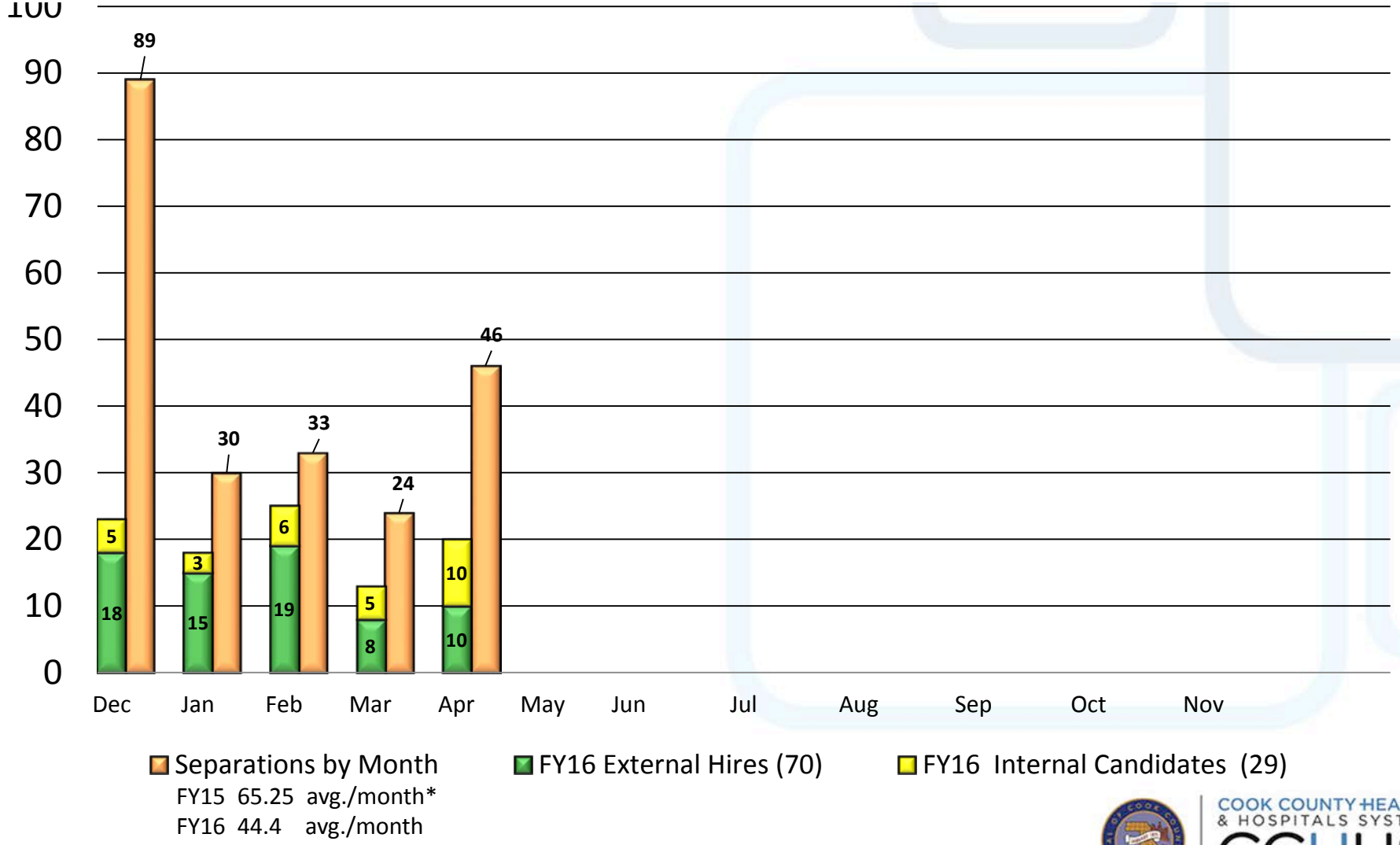
635 Positions in process



FY16 Separations and Hires

FY16 Separations (222) & External Hires (70)

Net New (-152)

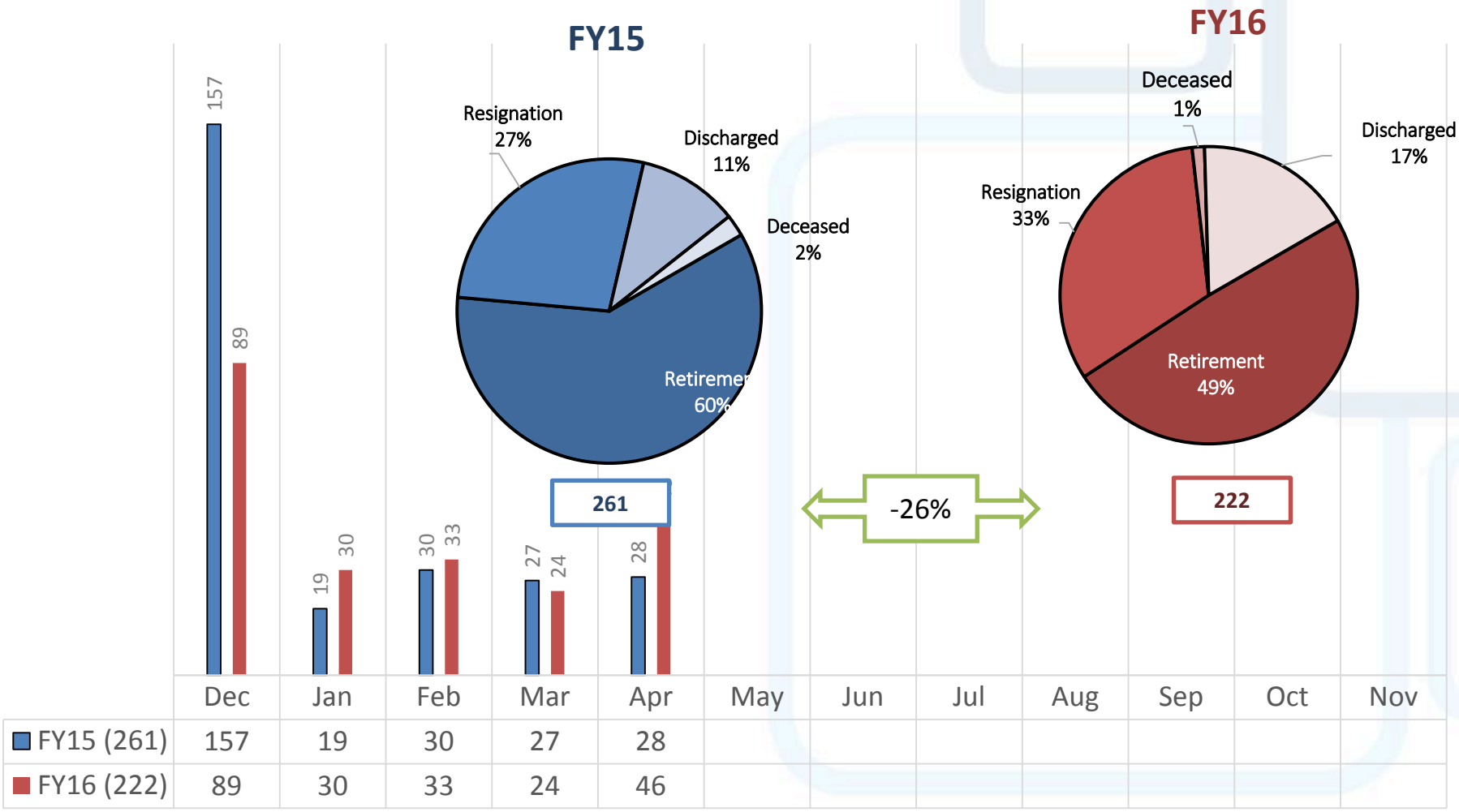


FY15 65.25 avg./month*

FY16 44.4 avg./month

*Thru 04/30/**15** Separations (261) & External Hires (275) = Net New = 14

Comparison of Separations

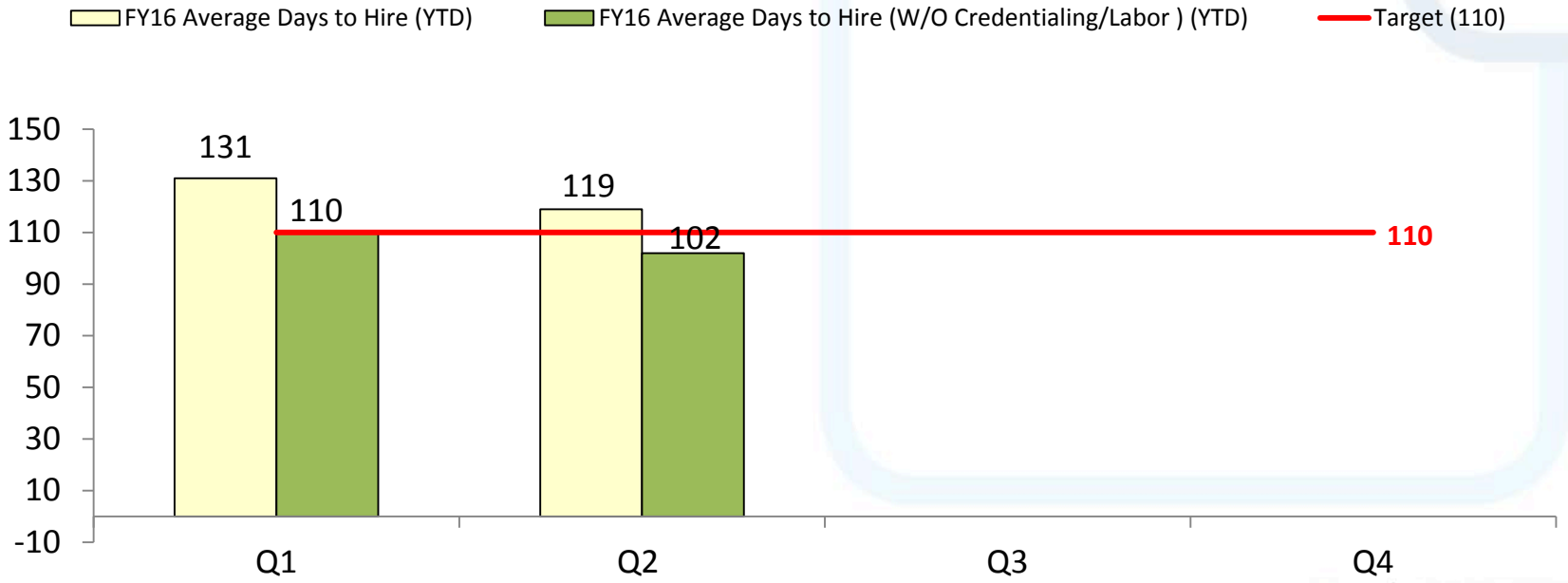


	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov
FY15 (261)	157	19	30	27	28							
FY16 (222)	89	30	33	24	46							

Comparison:
FY15 65.25 Average / Month
FY16 44.4 Average / Month

FY16 HR Goal: Improve/Reduce Average Time to Hire*

FY16 Goals:	2014 Act	2015 Act	2016 Target	Dec Act	Jan Act	Feb Act	Mar Act	Apr Act	May Act	Jun Act	Jul Act	Aug Act	Sept Act	Oct Act	Nov Act	YTD Avg	YTD Var.
Average Days to Hire (With Credentialed)	203	140	110	115	119	153	94	134								128	16.3%
[1]Average Days to Hire (Without Credentialed)	NA	NA	110	96	101	131	92	105								122	-10.9%



[1]*Credentialed Positions: Physicians, Psychologist, Physician Assistant I and Advanced Practice Nurses.*

*Data thru 04/30/16

ATTACHMENT #2

May 20, 2016 CCHHS Human Resource Committee Meeting Agenda Item IV(A)

COMMUNICATION from Gladys Lopez, Chief of Human Resources,

Transmitting herewith salary adjustments and general wage increases for your consideration and approval.

Submitting a Proposed Resolution sponsored by:

TONI PRECKWINKLE, President, Cook County Board of Commissioners

Proposed Resolution Approving economic package including wage increases and healthcare

WHEREAS, the Illinois Public Employee Labor Relations Act (5 ILCS 315/1 et seq.) has established regulations regarding collective bargaining with a union; and

WHEREAS, a Collective Bargaining Agreement for the period of December 1, 2012 through November 30, 2017 has been negotiated between the County of Cook and Cook County Pharmacy Association, Chicago Joint Board, Retail, Wholesale & Department Store Union, AFL-CIO, CLC (RWDSU Local 200) representing Pharmacists and Pharmacy Technicians; and

WHEREAS salary adjustments and general wage increases are reflected in the Salary Schedules included in the Collective Bargaining Agreement negotiated between County of Cook and RWDSU Local 200; and

(a) effective the first full pay period on or after June 1, 2013 the pay rates for all classifications shall be increased 1.00%

(b) effective the first full pay period on or after June 1, 2014 the pay rates for all classifications shall be increased 1.50%

(c) effective the first full pay period on or after June 1, 2015 the pay rates for all classifications shall be increased 2.00%

(d) effective the first full pay period on or after December 1, 2015 the pay rates for all classifications shall be increased 2.00%

(e) effective the first full pay period on or after December 1, 2016 the pay rates for all classifications shall be increased 2.25%

(f) effective the first full pay period on or after June 1, 2017 the pay rates for all classifications shall be increased 2.00%

WHEREAS, the current healthcare plan shall be revised as follows:

Item	12/1/15
Classic Blue	Eliminate
HMO OOP Maximum	$1,600/$3,200
HMO Accident/Illness	$15
HMO Urgent Care	$15
HMO Specialists	$20
HMO ER	$75
PPO Deductible	$350/$700
PPO OOP Maximum	$1,600/$3,200
PPO Accident/Illness	90% after $25
PPO Specialist	90% after $35
PPO ER	$75
RX	$10/$25/$40
Generic Step Therapy	Implement
Mandatory Maintenance Choice	Implement
Healthcare Contributions	Additional 1 percent of salary aggregate increase (.50 percent increase on 12/1/15 and .50 percent increase on 12/1/16)

NOW, THEREFORE, BE IT RESOLVED, that the Cook County Health & Hospitals System Board of Directors do hereby approve the economic package including wage increases and healthcare as provided by the Cook County Health & Hospitals System Department of Human Resources.

ATTACHMENT #3

Cook County Health and Hospitals System
Presentation to Inform Strategic Plan

Health Information Systems (HIS)

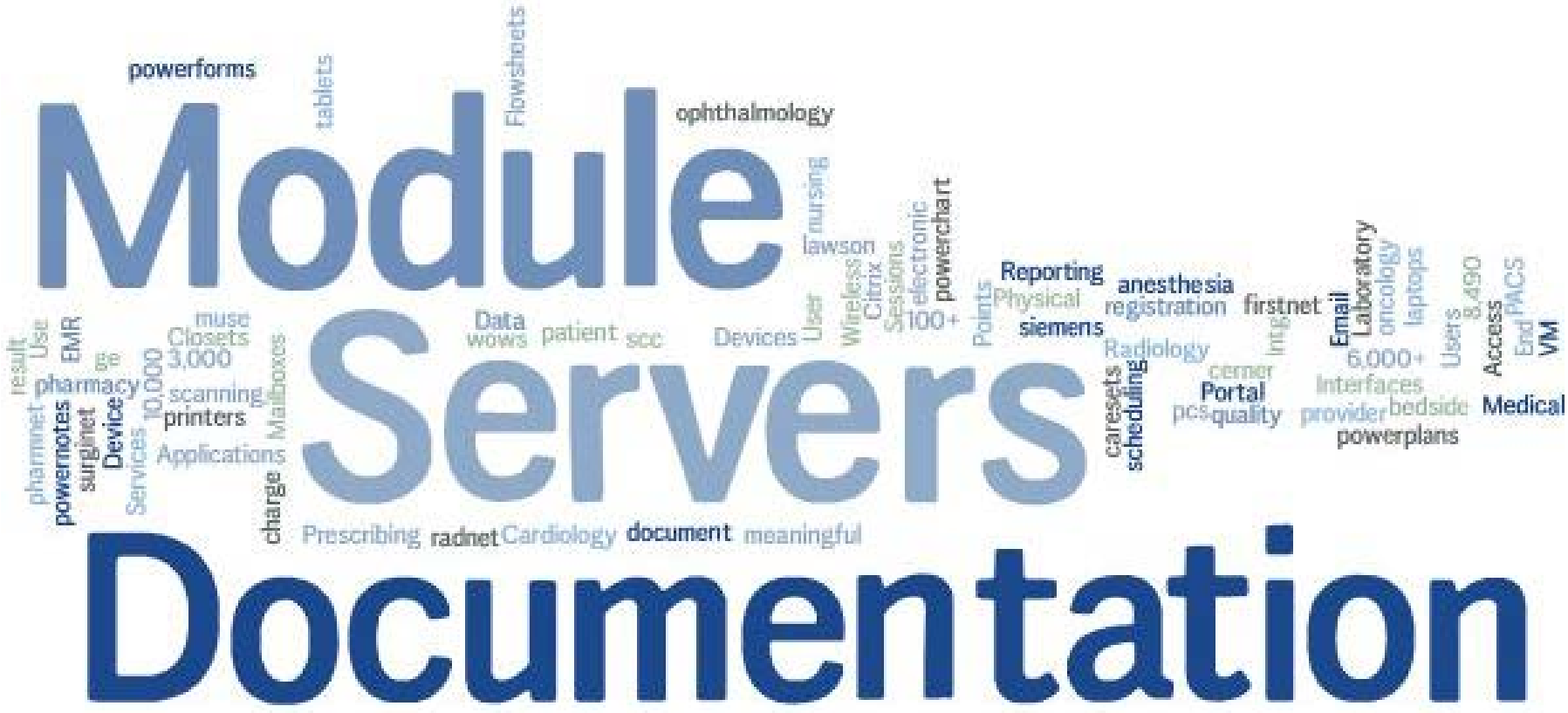
Donna Hart, CIO

May 20, 2016

COOK COUNTY HEALTH & HOSPITALS SYSTEM

CCHHS

OVERVIEW


powerforms
tablets
Flowsheets
ophthalmology
Module
Servers
Documentation
nursing
lawson
electronic
powerchart
Reporting
anesthesia
Physical
registration
firstnet
siemens
Email
Laboratory
oncology
laptops
Users
8,490
Access
PACS
End
VM
Radiology
cerner
6,000+
Portal
Interfaces
pcs
quality
provider
bedside
Medical
powerplans
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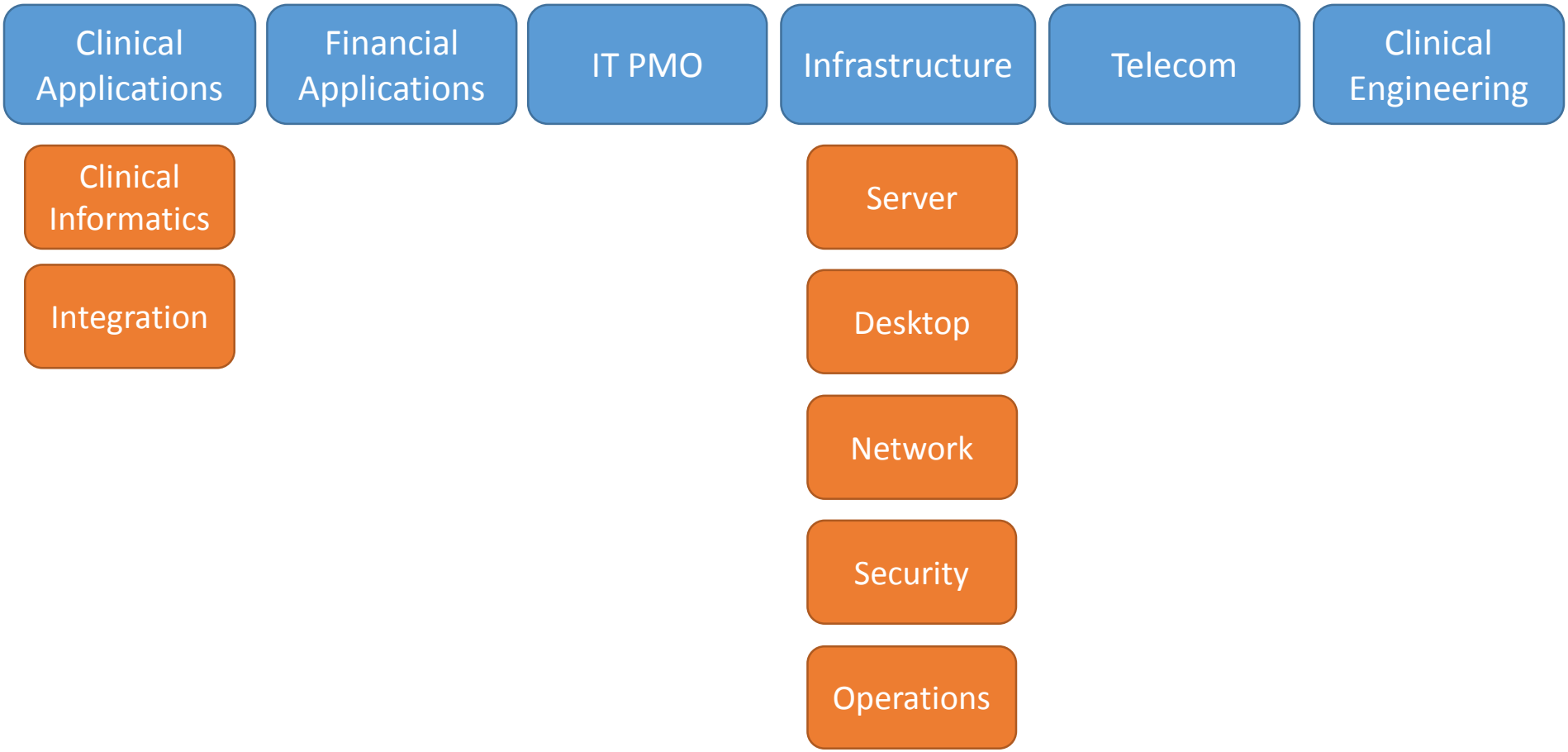
scheduling
Data
wows
patient
scc
Devices
User
Wireless
Citrix
Sessions
100+
Points
muse
Closets
3,000
EMR
pharmacy
scanning
printers
Applications
Mailboxes
charge
Prescribing
radnet
Cardiology
document
meaningful
result
Use
ge
10,000
pharmnet
powernotes
surglnet
Device
Services

OVERVIEW

HIS supports the following organizations:

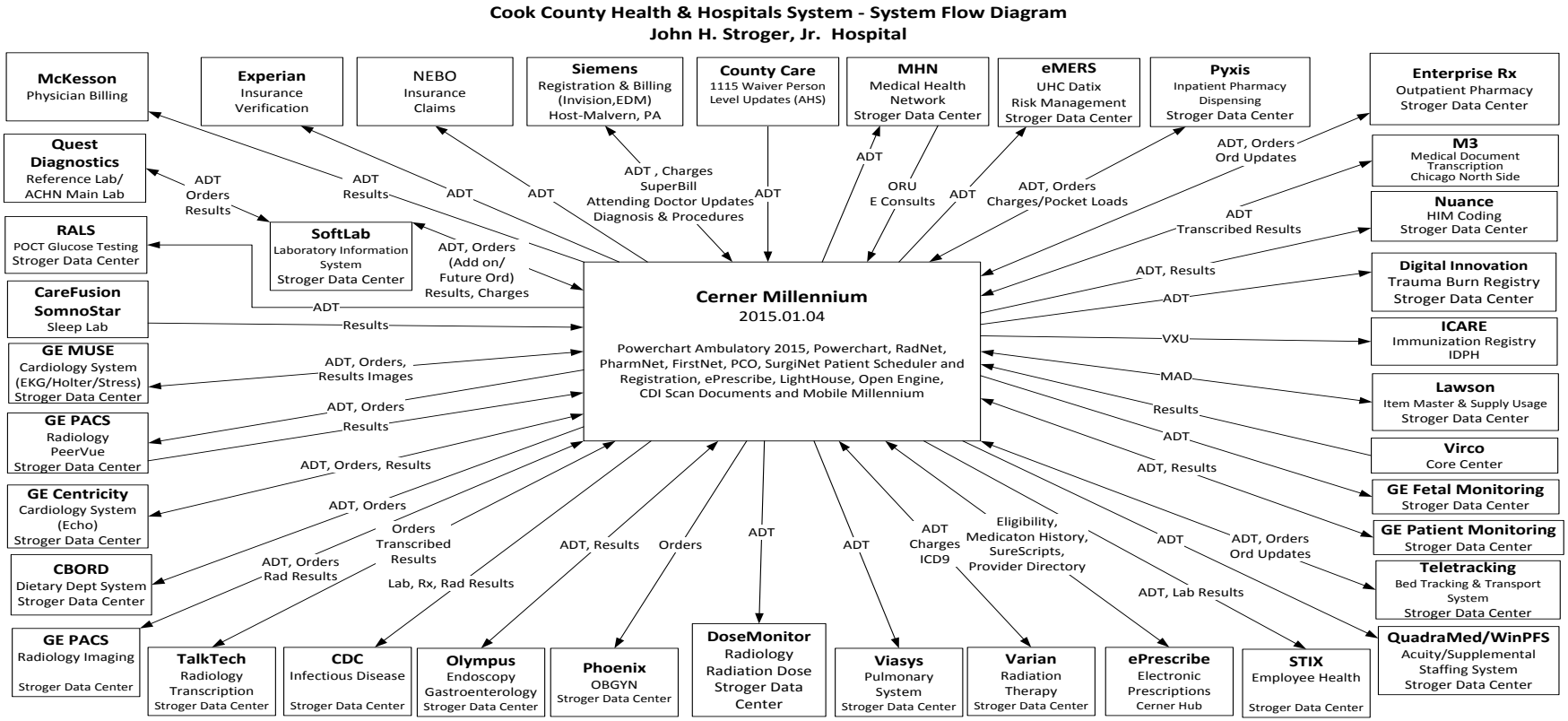
- John H. Stroger, Jr. Hospital
- Provident Hospital
- Ambulatory Community Health Network
- Cook County Department of Public Health
- Cermak Health Services serving Cook County Jail
- Juvenile Temporary Detention Center

OVERVIEW


Clinical Applications
Financial Applications
IT PMO
Infrastructure
Telecom
Clinical Engineering
Clinical Informatics
Integration
Server
Desktop
Network
Security
Operations

OVERVIEW

HIS supports integration between these systems:



OVERVIEW

HIS strengths:

- Integrated Electronic Medical Record (EMR) across all facilities
- Alignment of technology to business
- High performance (human capital)
- Flexibility
- Partnership with EMR vendor (Cerner)
- Ability to work outside of standard application packages:
  - Develop content to meet the unique complex clinical environment (Specialty services, medical home, correctional, care coordination)
- Meeting regulatory requirements (Meaningful Use, Joint Commission)
- Alignment with Quality initiatives

COOK COUNTY HEALTH & HOSPITALS SYSTEM
CCHHS

OVERVIEW

HIS has reached HIMSS Level 6:

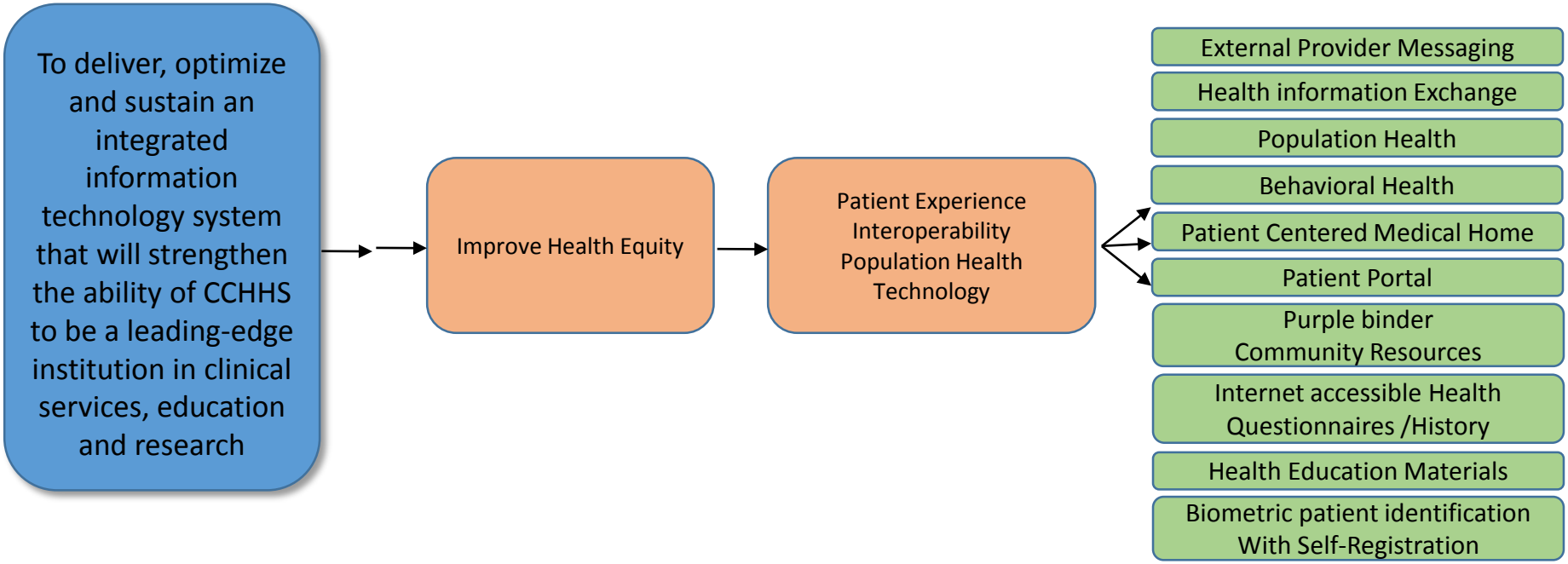
EMR Adoption Model℠	
Stage	Cumulative Capabilities
Stage 7	Complete EMR; CCD transactions to share data; Data warehousing; Data continuity with ED, ambulatory, OP
Stage 6	Physician documentation (structured templates), full CDSS (variance & compliance), Closed Loop Medication Administration
Stage 5	Full complement of Radiology PACS
Stage 4	CPOE, Clinical Decision Support (clinical protocols)
Stage 3	Nursing/clinical documentation (flow sheets), CDSS (error checking), PACS available outside Radiology
Stage 2	CDR, Controlled Medical Vocabulary, CDS, may have Document Imaging; HIE capable
Stage 1	Ancillaries – Lab, Rad, Pharmacy - All Installed
Stage 0	All Three Ancillaries Not Installed

COOK COUNTY HEALTH & HOSPITALS SYSTEM
CCHHS

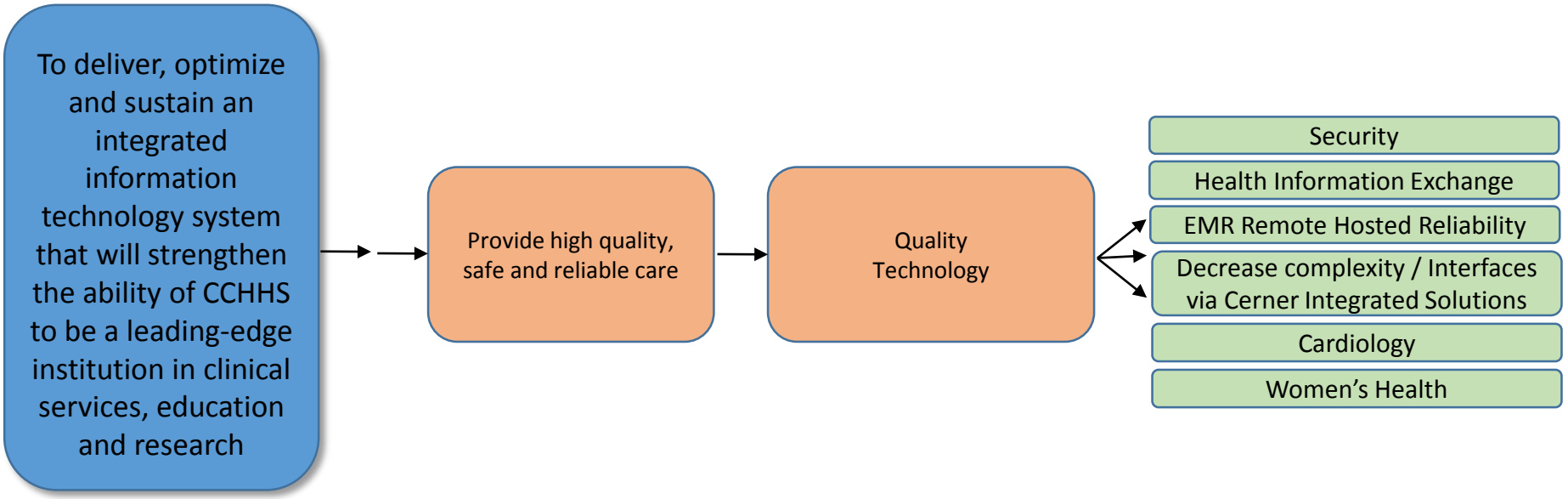
IT STEERING INITIATIVES

- Regulatory
- Financial
- Quality
- Population Health
- Patient Experience
- Provider Experience
- Patient Care Improvements
- Interoperability/Interface
- Technology

Strategic Planning Framework Guidelines



Strategic Planning Framework Guidelines



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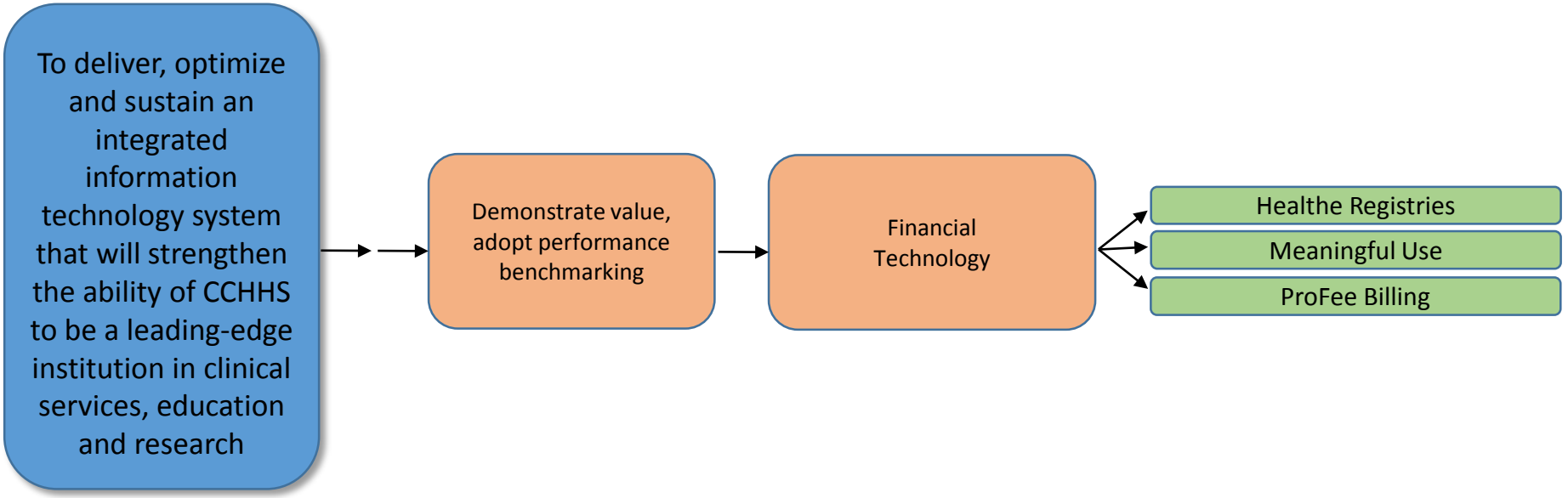

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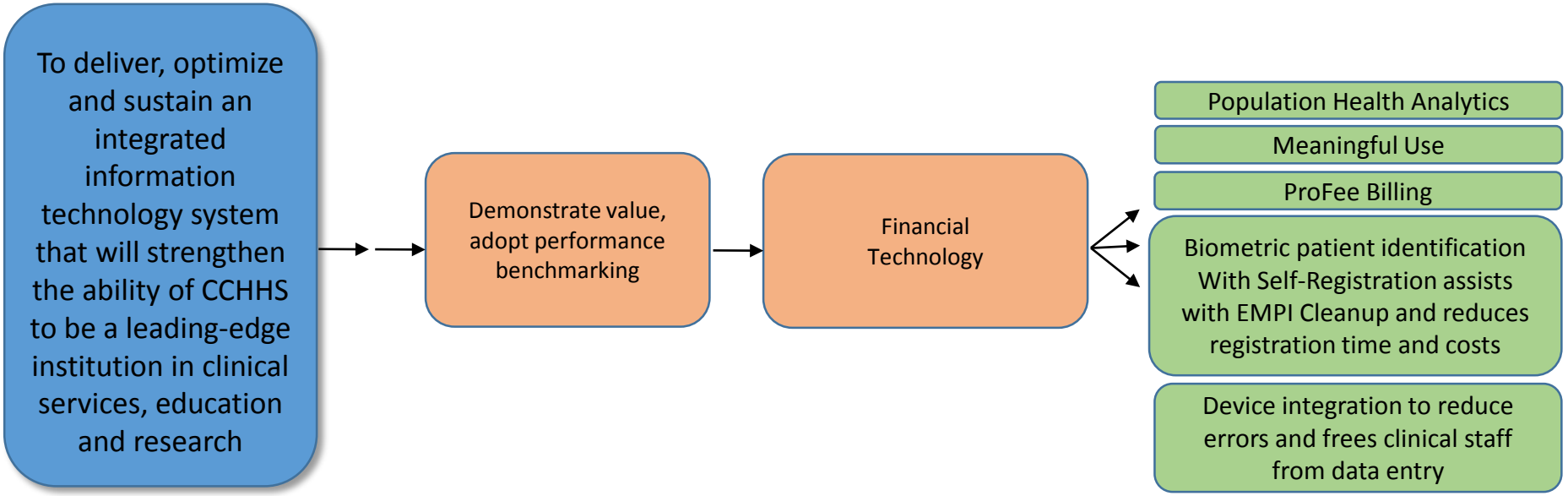
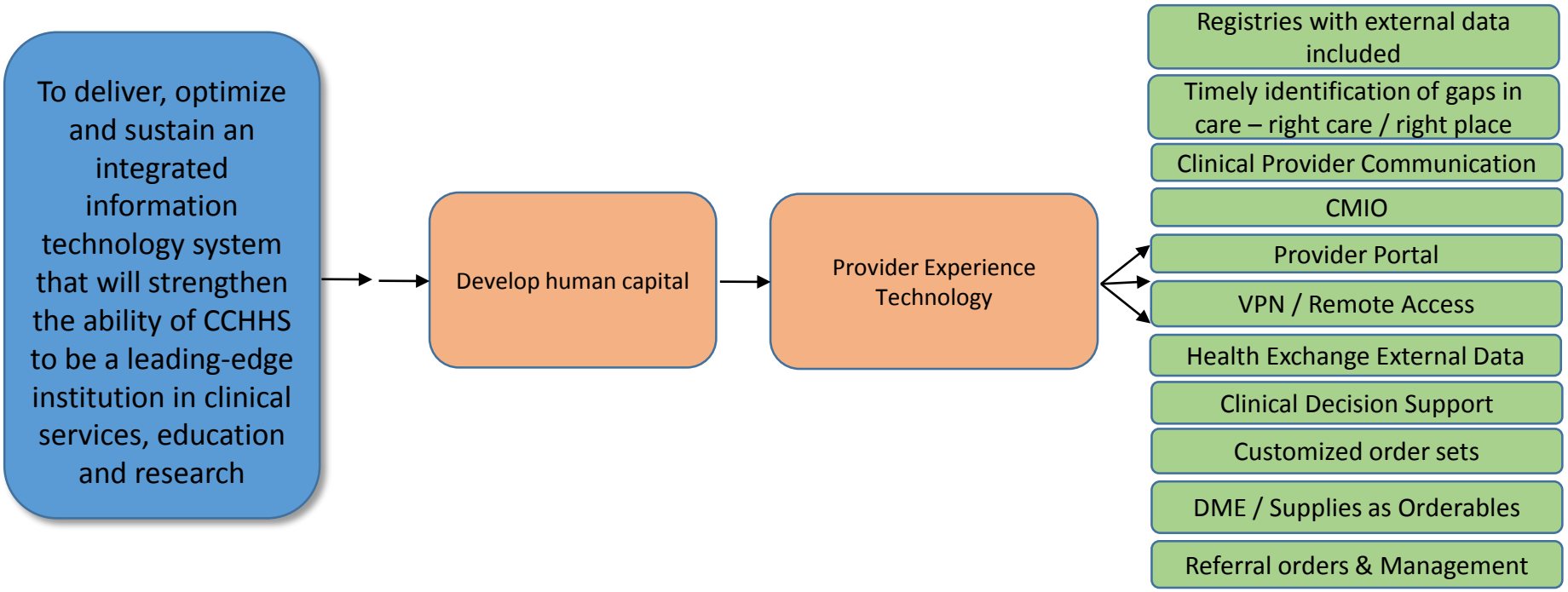


Strategic Planning Framework Guidelines



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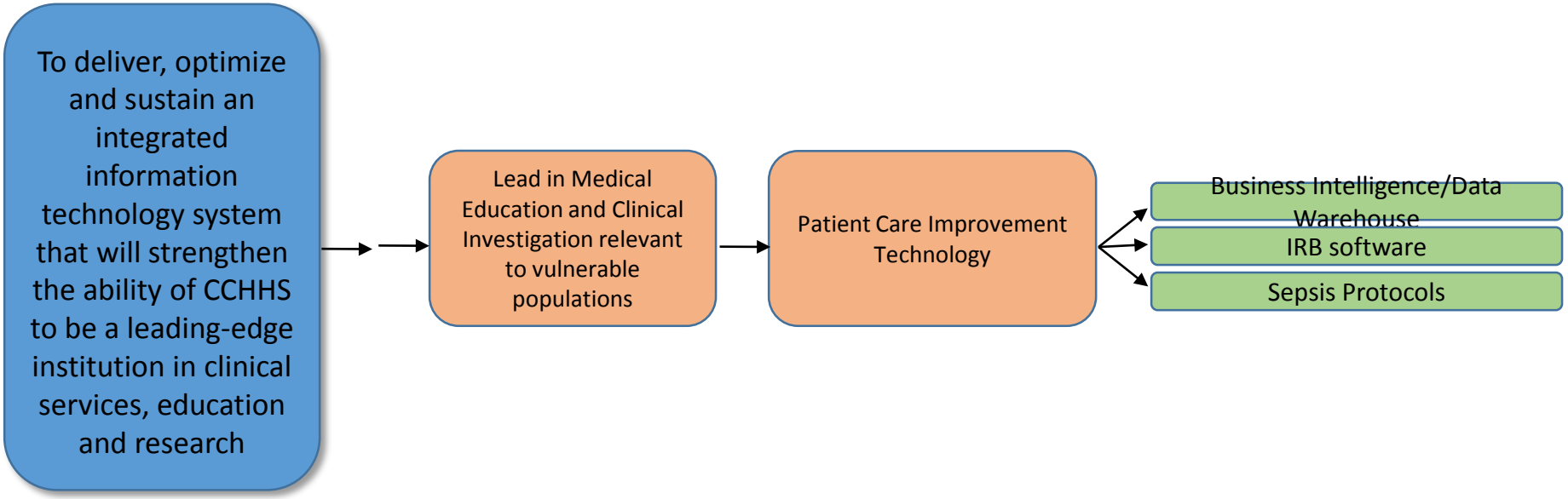


Projects in Motion

- Over 115 active IT projects in process

- Projects include a wide variety of projects: Time and Attendance clock installation, Meaningful Use, Network Upgrades, ActiveDirectory, McAfee Antivirus Standardization, AlertLink, iAccess, Commonwell Data Exchange, Oracle ERP Cook County Project, Lawson Migration, Stroger Data Relocation, JTDC Cerner, LH Rapid Response, HIS Change Control Automation, Clairvia, Workflow Optimization, eSignature, etc.

IT RISKS

- Security
- Limited IT resources (people)
- Inability to keep up with industry standards
- Unplanned Purchases and Projects (non-integrative)
- Government regulations, competition, rapidly changing technology footprint outpacing resources to maintain complex expanding systems
- Training:
  - End-users on new IT applications
  - Continuing education for IT staff
  - Development of internal “bench strength”
- Interoperability of internal and external systems

VISION

"To improve and promote the utilization of health information technology, to its highest capacity, by both patients and health care providers, to optimize health outcomes and overall quality."

COOK COUNTY HEALTH & HOSPITALS SYSTEM
CCHHS

Achieving the Vision

Develop/Implement an IT staffing plan that is reflective of the healthcare IT industry.

- Build a hybrid team consisting of core CCHHS staff, augmented by contracted subject matter experts.
- Allows for flexibility and rapid response of hiring in a competitive environment.
- Continuing support/maintenance of implemented systems.

Achieving the Vision

Continued investment in the latest IT infrastructure technology across the health system.

- Allows for more predictive outcomes with upgrades and greater protection from external security threats.
- Fulfills the need to keep up with the technology in order to maintain the highest level of productivity.
- Move to a leased environment to allow continuous refresh of technology.

Achieving the Vision

Continued investment in EMR optimization to improve efficiency, safety, quality of care and ultimately user satisfaction across the health system.

- Investment in the integration of clinical equipment with EMR to improve efficiency and reduce errors.
- Replace “best-of-breed,” stand-alone systems with Cerner EMR integrated solutions, when possible, to minimize interfaces, complexity and potential points of failure.

Achieving the Vision

Connect patients, providers and community partners with CCHHS.

- Integrate information exchange with community partners via HIE and robust and timely exchange of electronic continuity of care documents.
- Improve patient accessibility and usage of internet portals/ online resources.
- Increase interoperability and cost savings by creating IT partnerships with other hospitals.

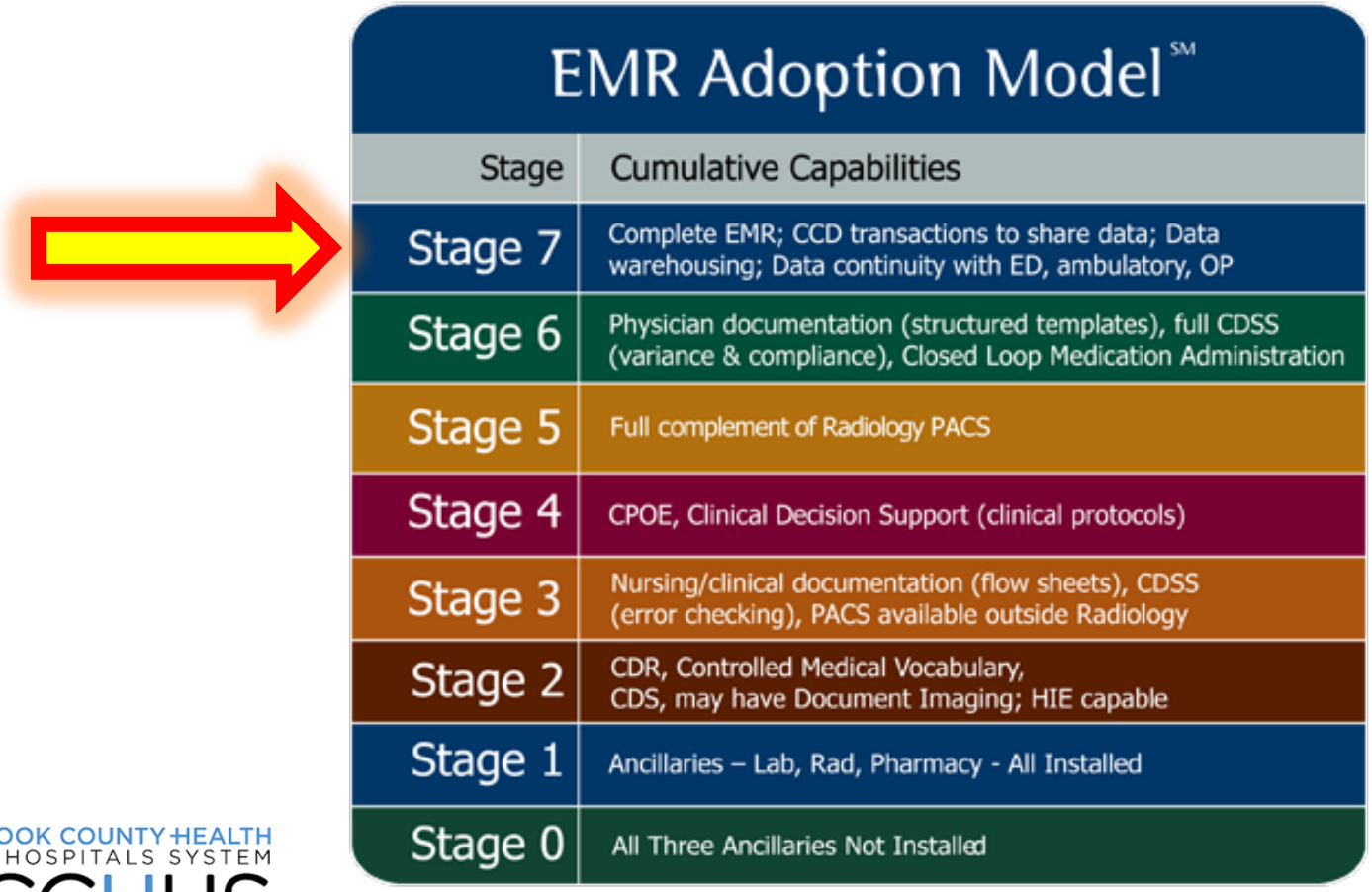
Achieving the Vision

Build a stable team of training staff to facilitate efficient application adoption.

Create a panel of informed clinical leaders by considering opportunities for informatics training of CCHHS clinical staff.

PREMIER

Obtaining HIMSS Level 7:



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COOK COUNTY HEALTH & HOSPITALS SYSTEM
CCHHS